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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

spond to a collection of information	ation unless it displays a valid OMB control numb	er.
Attorney Docket No.	286932.126 US3	
First Inventor	Ewa Herbst	
Title	Electrical Stimulation System	
Express Mail Label No.	EV 324103379 US	

	Express Mail Label No.				
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.	ADDRESS TO: Mall Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450				
1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) Applicant claims small entity status. See 37 CFR 1.27. Specification [Total Pages 20] (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure					
4. Prawing(s) (35 U.S.C. 113) [Total Sheets] 5. Oath or Declaration [Total Sheets] a. Newly executed (original or copy) b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) name in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. Application Data Sheet. See 37 CFR 1.76	9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of (when there is an assignee) Attorney 11. English Translation Document (if applicable) 12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. Other:				
Prior application information: ExaminerGetzow, Scott For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the 5b, is considered a part of the disclosure of the accompanying continuation. The incorporation can only be relied upon when a portion has been inadvert 19. CORRESPOND Customer Number: 28089 Name Address City	tion-in-part (CIP) of prior application No.: 09/507,873				
Name (Print/Type) M. Lisa Wilson, Ph.D. Signature	Registration No. (Attorney/Agent) 34,045 Date 11/11/2003				

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Approved for use through 07/31/2006. OMB 0651-0032
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Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

5)	0.00

Complete if Kn wn			
Application Number	To be assigned		
Filing Date	11/11/2003		
First Named Invent r	Ewa Herbst		
Examiner Name	To be assigned		
Art Unit -	To be assigned		
Attorney Docket No.	286932.126 US3		

METHOD OF PAYMENT (check all that apply)	METHOD OF PAYMENT (check all that apply) FEE CALCULATION (continued)				
Check Credit card Money Order None	3. ADDITIONAL FEES				
Deposit Account:	Large Entity Small Entity				
Deposit	ee Fee Fee Fee Fee [Code (\$)	Description			
Account Number 08-0219		filing fee or cath			
Deposit Halo and Dorr LLD		provisional filing fee or			
Account Name	cover sheet				
The Director is authorized to: (check all that apply)	053 130 1053 130 Non-English spe				
Charge fee(s) indicated below Credit any overpayments	· 1 · · · · · · · · · · · · · · · · · ·	est for ex parte reexamination			
Charge any additional fee(s) or any underpayment of fee(s)	804 920° 1804 920° Requesting publication	lication of SIR prior to			
Charge fee(s) indicated below, except for the filing fee	805 1,840° 1805 1,840° Requesting pub	lication of SIR after			
to the above-identified deposit account.	Examiner action				
FEE CALCULATION		eply within first month			
1. BASIC FILING FEE		eply within second month			
Large Entity Small Entity Fee Fee Fee Fee Fee Description Fee Paid		eply within third month			
Code (\$) Code (\$)		eply within fourth month			
1001 770 2001 385 Utility filing fee	255 2,010 2255 1,005 Extension for re	1 1			
1002 340 2002 170 Design filing fee	401 330 2401 165 Notice of Appea				
1003 530 2003 265 Plant filing fee		support of an appeal			
1004 770 2004 385 Reissue filing fee	103 290 2403 145 Request for oral				
1005 160 2005 80 Provisional filing fee		ute a public use proceeding			
SUBTOTAL (1) (\$) 0.00	152 110 2452 55 Petition to revive				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	453 1,330 2453 665 Petition to reviv				
Fee from Extra Claims below Fee Paid	501 1,330 2501 665 Utility issue fee	•			
Total Claims 17 -20** = X	502 480 2502 240 Design issue fe 503 640 2503 320 Plant issue fee	*			
Independent Claims 1 - 3** = X =	160 130 1460 130 Petitions to the	Commissioner			
Multiple Dependent 0 = 0					
Large Entity Small Entity		under 37 CFR 1.17(q)			
Fee Fee Fee Fee Description	Posseding such	nformation Disclosure Stmt patent assignment per			
Code (\$) Code (\$) 1202 18 2202 9 Claims in excess of 20	property (times	number of properties)			
1201 86 2201 43 Independent claims in excess of 3	309 770 2809 385 Filing a submiss (37 CFR 1.129)	sion after final rejection a))			
1203 290 2203 145 Multiple dependent claim, if not paid	310 770 2810 385 For each addition examined (37 0				
1204 86 2204 43 ** Reissue independent claims over original patent	•	entinued Examination (RCE)			
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent		pedited examination			
SUBTOTAL (2) (\$) 0.00	ther fee (specify)				
**or number previously paid, if greater, For Reissues, see above	Reduced by Basic Filing Fee Paid	UBTOTAL (3) (\$) 0.00			

SUBMITTED BY				(Complete (if applicable))
Name (Print/Type)	M. kisa Wijson, Ph.D.	Registration No. (Attorney/Agent)	34,045	Telephone	(212)937 7258
Signature	My Man Wilan			Date	11/11/2003

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Atty Docket No.: 286932.126 US3

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Herbst, Ewa

U.S. Serial No.:

To be Assigned (Continuation of 09/507,873)

Filing Date:

November 11, 2003 (Herewith)

For:

Multi-Functional Electrical Stimulation System

Examiner:

To be Assigned

Art Unit:

To be Assigned

Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

SIR:

CERTIFICATE OF EXPRESS MAILING

Date of Deposit: November 11, 2003

I hereby certify that the documents listed in the attached Transmittal Sheet are being deposited with the United States Patent and Trademark Office as Express Mail bearing Express Mail Label No. <u>EV 324103379 US</u> in an envelope with prepaid postage under 37 C.F.R. §1.8(a) on the date indicated above and is addressed to the Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Signature:

Printed Name: M. Lisa Wilson, Ph.D.

Respectfully submitted,

M. Lisa Wilson, Ph.D. Registration No. 34,045

Attorney for Applicants

Hale and Dorr LLP 300 Park Avenue New York, New York 10022 (212) 937-7200-Phone (212) 937-7300-Facsimile